

In re Application of:

Chiori MOCHIZUKI

Application No.: 09/422,792

Filed: October 22, 1999

For: IMAGE PICKUP APPARATUS AND IMAGE
PICK-UP SYSTEM, AND METHOD FOR
MANUFACTURING IMAGE PICK-UP APPARATUS

Docket No. 03560.002482.

Examiner: Lin Ye

Group Art Unit: 2615

Date: July 14, 2005

Mail Stop RCE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Preliminary Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED | | | | | | |
|--|--|-------|--|-------------------------|------------------|-------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | * 28 | MINUS | ** 53 | = 0 | x \$25 \$50 | \$0.00 |
| INDEP. CLAIMS | * 5 | MINUS | *** 8 | = 0 | x \$100 \$200 | \$0.00 |
| Fee for Multiple Dependent claims \$180°/\$360 | | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT— | | | | | | \$0.00 |

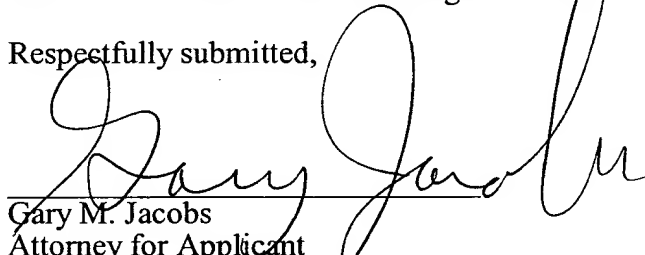
* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Gary M. Jacobs
Attorney for Applicant
Registration No.: 28,861

FITZPATRICK, CELLA, HARPER & SCINTO
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03560.002842.



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | |
|-----------------------------|---|------------------|
| In re Application of: |) | |
| | : | Examiner: Lin Ye |
| Chiori MOCHIZUKI |) | |
| | : | Art Unit: 2615 |
| Appln. No.: 09/422,792 |) | |
| | : | |
| Filed: October 22, 1999 |) | |
| | : | |
| For: IMAGE PICKUP APPARATUS |) | |
| AND IMAGE PICK-UP SYSTEM, | : | July 14, 2005 |
| AND METHOD FOR MANU- |) | |
| FACTURING IMAGE PICK-UP | : | |
| APPARATUS |) | |

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Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Prior to examination on the merits, Applicant respectfully submits the following
amendments and remarks.